

SOAR Enhances Income Stability in Native Communities

Substance Abuse and Mental Health Services Administration
(SAMHSA) SOAR Technical Assistance Center
Policy Research Associates, Inc.

April 28, 2022



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Substance Abuse and Mental Health
Services Administration

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Webinar Instructions

- **Slides/Materials:** Available now at <https://soarworks.samhsa.gov/topics/webinars>
- **Recording:** Will be available within 1 week
- **Questions:** Please submit questions using the Q&A feature
- All participant lines will be muted and the chat feature is disabled
- **Evaluation:** Browser will redirect to survey following the webinar

Purpose and Objectives

- Learn about best practices for engaging and working with Native individuals to complete SOAR-assisted SSI/SSDI applications
- Understand the unique challenges and opportunities of working with Native applicants and within Native communities
- Share best practices for engaging with and gaining buy-in for SOAR from Native communities in both urban and rural settings

Agenda

Presenters

- **Abigail Kirkman, MA**, Assistant Director, SAMHSA SOAR TA Center
- **Kim Vigue (Menominee/Oneida), MS**, Managing Partner, Wolf River Consulting Group
- **Rose David (Ojibway, Chimnissing First Nation)**, Partner, Wolf River Consulting Group
- **Mylene Widner (Apsáalooke Nation (Crow), Turtle Mountain Chippewa /Plains Cree of Canada)**, SOAR Case Worker and PATH Liaison, South Central Mental Health Center, Billings, Montana

Questions and Answers

- Facilitated by the SAMHSA SOAR TA Center

Welcome!

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Government Project Officer
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April 28, 2022



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SAMHSA SOAR TA Center: Overview of AI/AN Tools and Resources

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April 28, 2022



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SOAR Tools and Resources for Native Communities



SSI/SSDI Eligibility FAQs for American Indians and Alaska Natives

Q: Are American Indians and Alaska Natives eligible for Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) benefits?

Yes! American Indians and Alaska Natives (AI/AN) may be eligible for SSI and/or SSDI benefits if they meet the non-medical and medical eligibility requirements. Status as AI/AN does not preclude someone from receiving Social Security Administration (SSA) disability benefits. You can find more information about SSA's AI/AN services at <https://www.ssa.gov/people/ai/an/>.

Q: Are American Indian and Alaska Native children (under the age of 18) eligible for SSI?

Yes, AI/AN children experiencing disabling health conditions such as developmental disabilities, serious mental illness, trauma, and/or medical issues may qualify for SSI if they meet SSA's medical and non-medical eligibility criteria. Access to income and health insurance can help improve the entire family's stability by helping the family meet its basic needs, gain access to treatment, and build resiliency during the recovery process. You can find more information about SSI for Children at <https://www.ssa.gov/ssi/text-child-ussi.htm>.

Q: How can American Indians and Alaska Natives who are living on reservations or native lands or within urban areas access SSA services?

There are several ways to contact the Social Security Administration (SSA):

- By phone (toll-free): 1-800-772-1214
- Online: <https://www.ssa.gov/>
- Use the online locator to find a Social Security office near you¹
- Video Service Delivery (VSD) Centers have been set up in some communities. At a VSD Center, an applicant can use the video phone to see and talk to an SSA employee²

Q: What is SSA doing to collaborate with tribal governments?

SSA established a formal consultation process with tribal governments in 2001. The Deputy Commissioner of Operations serves as the Tribal Consultation Official and liaison with federally recognized tribal governments. SSA annually reviews its regulatory agenda and legislative submissions to determine if any proposals have tribal implications. The 2020 Tribal Consultation Progress Report, which describes all of SSA's ongoing communication, education and outreach activities, can be found on their website.³

Q: If an American Indian or Alaska Native individual is receiving SSI and also receives an annual cash allotment from his or her tribe, does it need to be reported to SSA?

Yes. Because SSI is needs-based, SSA considers an applicant's earned and unearned income. If an SSI beneficiary receives an annual cash allotment from his or her tribe, it should be reported

1 SSA Field Office Locator: <https://secure.ssa.gov/ICON/main.jsp>

2 SSA Video Service Delivery Locations, by Region: https://www.ssa.gov/open/maps/ai/an_details.html

3 Tribal Consultation and Coordination Plan: <https://www.ssa.gov/people/ai/an/materials/pdfs/tribal-con-plan.pdf>



Getting Involved with SOAR in Tribal Communities:

You want to be a SOAR provider? That's great! Here's what to expect.

SOAR promotes recovery and wellness through increased access to Social Security disability benefits for eligible American Indian and Alaska Native (AI/AN) individuals who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder. SOAR providers assist individuals with complete and quality applications. This is not an easy task, but we believe it is well worth the effort!

Training

The SOAR Online Course trains providers to assist individuals with the Social Security disability application process. The course includes an Adult Curriculum for assisting with Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) claims for adults and a Child Curriculum for assisting with SSI claims for children (under the age of 18).

- The SOAR Online Course: Adult and Child Curricula are free and are located on the SOARWorks website (<https://soarworks.praire.com/content/soar-online-course-catalog>).
- Each curriculum consists of seven classes, each of which has a series of articles, short quizzes, and a practice case component. The practice case provides an opportunity for trainees to apply what they have learned in the course by completing a sample application packet for a fictitious applicant using SOAR techniques.
- It takes approximately 20 hours to complete each curriculum and participants can work at their own pace, starting and stopping as they wish. However, we encourage students to complete the curriculum within 30 days to retain the information learned.
- Upon successful completion, participants will receive 20 continuing education units from the National Association of Social Workers.

Many SOAR Local Leads offer 1-day SOAR Online Course Review Sessions to review key components of the curriculum, discuss tribal, state and local practices, and connect new providers to local Social Security Administration (SSA) and Disability Determination Services (DDS) offices.

Time Commitment

We estimate that each SOAR application will take approximately 20-40 hours to complete, from initial engagement to receiving a decision on a claim. This generally occurs over the course of 60-90 days.

- The time spent on each application will vary depending on the amount of engagement that is needed as well as other variables such as the experience level of the SOAR worker. For example, engagement with an applicant who is residing in an institution may take 20 hours, while it may take longer to connect with someone who is living outside or difficult to contact.

SOAR Critical Components

SOAR providers with higher approval rates credit their success to implementing the SOAR critical components¹ and submitting high-quality applications. Use of these components significantly

1 <https://soarworks.praire.com/article/soar-model-critical-components>



Implementing State and Local SOAR Initiatives in American Indian and Alaska Native Communities

State, Local, and Tribal Leads spearhead and coordinate the implementation of SOAR initiatives. These leaders identify and engage stakeholders to participate in steering committees whose goal is to create and implement a SOAR action plan to support adult and child applications for Social Security disability benefits. These committees meet regularly to collaborate, report on progress, and troubleshoot challenges.

Introduce SOAR to Your Community

- Identify and engage state, local, and tribal agencies and stakeholders to participate in your community's SOAR initiative. Educate and inform them about the purpose and benefits of SOAR for individuals in your community with disabilities.
- Offer SOAR Orientation presentations for tribal and organizational leadership and direct service providers.
- Attend existing community meetings and share information about the importance and impact of SOAR.

Train and Support Staff That Assist Adult SSI/SSDI and/or Child SSI Applicants

- Identify programs and organizations within your community that are currently assisting adults, children, and families experiencing or at risk of homelessness with Social Security disability applications. Explore reallocation of existing resources to incorporate fully or partially dedicated SOAR benefits specialists.
- Identify staff to complete the SOAR Online Course: Adult and/or Child Curriculum. Provide guidance throughout and following the training. Inform trainees of any state/local/tribal-specific processes.
- Establish quality review procedures to assess fidelity to the SOAR model and ensure that applications are complete and high quality. Get feedback from SSA/DDS on SOAR-assisted applications they are receiving.

Collaborate, Coordinate, and Communicate

- **Social Security Administration (SSA) and Disability Determination Services (DDS):** Negotiate a SOAR Process for American Indian and Alaska Native (AI/AN) adult SSI/SSDI and child SSI application submission. Identify SSA/DDS SOAR liaisons in local and tribal offices.
- **Medical Providers:** Identify medical providers who can provide physical/psychiatric evaluations and co-sign Medical Summary Reports. Explore using retroactive Medicaid to reimburse for medical evaluations. Set up a process to obtain medical records, free of charge if possible.
- **Other Collaborations:** Think broadly! Include tribal administrators, school leadership, vocational service providers, Tribal Indian Child Welfare departments, tribal family services, tribal economic support, housing agencies, jails/prisons, Veterans services, and representative payee services.

Track and Report Outcomes

- Identify tracking mechanism to be used—e.g., SOAR Online Application Tracking System.
- Establish procedures for the reporting of outcomes by communities and SOAR-trained staff.
- Report outcomes to the SAMHSA SOAR TA Center as requested.

Fund and Sustain

- Use your outcomes to expand or sustain your SOAR initiative.
- Educate stakeholders, influential tribal leaders, tribal social service leadership, tribal grant offices, and potential funders about the impact SOAR has in your tribal community. Share success stories; report on cost savings (reimbursement/recoupment totals).
- Explore various funding sources. Consider use of federal funds (e.g., PATH, CASH, Systems of Care) pool and/or realign existing resources; explore AI/AN organizations and community foundations, United Way, corporations, and hospital collaborations; and investigate criminal or juvenile justice funding to implement SOAR in jails, prisons, or detention facilities.

SOAR Referral and Medical Summary Report



Sample SOAR Referral Application

Please complete in full and fax to: [Contact Name] or [Fax #]

Candidate name: _____ Date of referral: _____
Referring agency: _____ Person making referral: _____
Staff contact number: _____ Email address: _____

Candidate Identifying Information:

Date of birth: _____ Gender: _____ Pronouns: _____ Race: _____
(must be within 30 days of 18 years of age, or within 180 days if exiting foster care)

SSN: _____ Education (last grade completed): _____ Marital status: _____

Tribal affiliation: _____

Current living arrangement (unsheltered, mailing address or PO box, shelter, area of town, etc.): _____

Employment status: _____ Veteran? _____

Emergency contact name and number: _____

Part A: Homelessness/At-Risk Assessment:

Where is the candidate currently living? Check the appropriate selection.

Currently Experiencing Homelessness	"X"
Outdoors	
Shelter	
Transitional Housing	

At-Risk for Homelessness	"X"
Doubled up/couch-surfing	
Living with someone else	
Received eviction notice or has substantial arrears in rent/utilities	
Permanent supportive housing that is grant funded (Housing First placements, HUD Housing, Section 8, housing paid for/supported by an agency)	
Exiting foster care or independent living program	
Institution – hospital, nursing home, etc.	
Exiting jail or prison	

If currently experiencing homelessness, how long has that been? _____ Years and/or _____ Months
Is the candidate in an institution or incarcerated? _____ Yes _____ No
If yes, are they expected to be released within 30 days? _____ Yes _____ No
Were they experiencing homelessness before entering the facility? _____ Yes _____ No
Has the candidate had difficulty maintaining housing? _____ Yes _____ No
If yes, please describe (e.g., struggles to maintain employment, insufficient credit, criminal charges, prior eviction)



Medical Summary Report Interview Guide and Template for American Indian and Alaska Native Communities

The *Medical Summary Report (MSR) Interview Guide* provides sample questions and guidance for gathering information necessary to the SSI/SSDI disability determination process. We do not expect you to ask all of the questions in each section. The questions are intended to help you gather all of the information you will need to write a Medical Summary Report. For example, if the individual has not been in military service, there is no need to include a military history section. Likewise, if the individual has no legal issues, do not include a legal history section.

Using this guidance, SOAR-trained providers are able to gather a thorough history in a respectful manner, which in turn helps the Disability Determination Services (DDS) understand the duration of a person's impairment and the effect of their illness(es) on work ability and functioning. The *MSR Template* may be used to compile information in the form of a narrative letter to SSA/DDS as part of the SOAR process. The template has eight main sections, covering the types of information that DDS needs to make a decision. Use the headings provided in the template to organize your MSR.

Trauma-Informed Interviewing

How questions are asked can be critical to obtaining the appropriate information. It is important to be sensitive to influences that affect a person's ability and willingness to provide information (cultural factors, past experiences with the mental health system, etc.). The interviewing process can also uncover sensitive topics like past and current trauma that need to be approached with care. When asking about trauma, it is critical to not overwhelm the applicant. It is equally important that the person be safe and secure after leaving the interview. Gathering such personal information requires a sensitive and skilled interviewer.



SOAR Tip: Interviewers who feel uncomfortable or ill-equipped to explore certain topics should not do so. Instead, they should seek assistance from someone who is more clinically skilled and more able to assess responses, to ensure that the person is safe from self-harm and/or emotional distress when the interview ends.



Issue Brief

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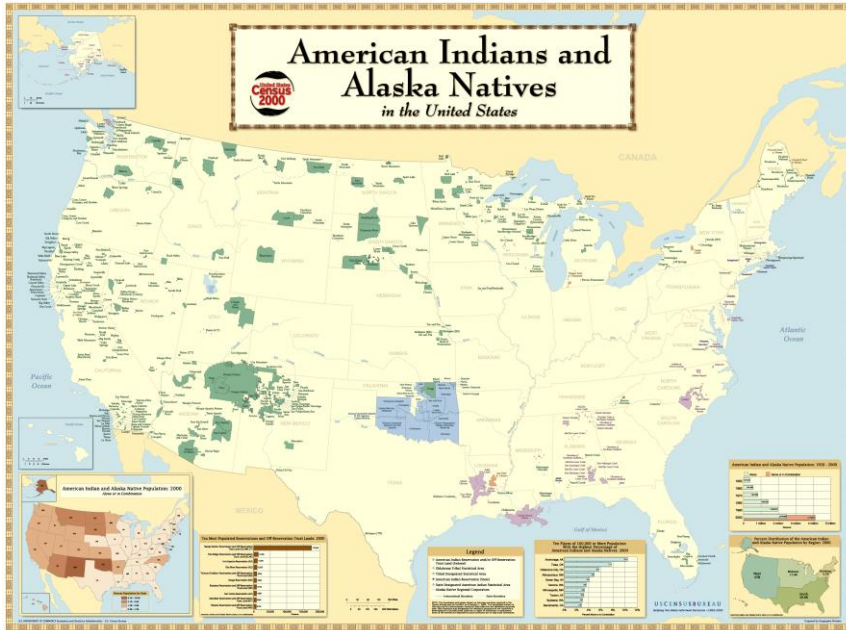
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Understanding the Native Communities We Serve

- 574 Federally recognized ethnically, linguistically, and culturally diverse Nations (Tribes, Nations, Bands, Pueblos, Communities, Native Villages) in the United States.
 - 229 of these federally recognized Nations are in Alaska
 - 345 remaining federally recognized nations are in 35 states.
 - 60+ state recognized tribes in 13 states with formal relationships with state government

Understanding the Native Communities We Serve

Population

5.2 Million people identify as American Indian or Alaska Native

Residence

7 in 10 of live in urban, suburban, and non-reservation lands

Age

Indian Country is young with 29% of Native people under 18 years

Poverty

26.8% live in poverty compared to national rate of 4.6%

Sanitation

9.5% of homes lack access to safe water supply and/or waste disposal facilities

Mobility/Mortality

Life expectancy 4.2 years less than other races (liver disease, diabetes, injuries, assault, self harm, suicide)



Understanding Tribal Sovereignty

Tribal nations right to ongoing self-government of their lands, jurisdictions, and communities

Nationhood status allows government-to-government relationship at state and federal level

Ensures decisions regarding tribe are made with participation and consent

Trust responsibility to protect self-governance and provide federal assistance to ensure success of tribes

TRIBAL LANDS

ONAGON

KEEWEENAW BAY

LAC VIEUX DESERT

LAC DU FLAMBEAU

FOREST COUNTY POTAWATOMI

OKAAGON

SOLE LAKE

HANNAHVILLE

RAY MILLS

GAULT SAINTE MARIE

GRAND TRAVERSE BAY

GRAND TRAVERSE

GRAND TRAVERSE

OTTAWA OJIBWE

ISABELLA

ONEIDA

MEMONINCEE

MEMONINCEE

MEMONINCEE

ONEIDA

BROOKTOWN

FOREST COUNTY POTAWATOMI

MATCHE-BE-NAH-SHE-WISH BAND OF POTAWATOMI

MUNRO POTAWATOMI

PONGASON

OJIBWE/POTAWATOMI

- American Indian, Indian, Native American, Indigenous, or Native are acceptable and often used interchangeably in the United States

- Used interchangeably but hold different meanings
- Tribes have more than one name because Europeans used inaccurate pronunciations of the tribal names or renamed the tribes (often derogatory)

- To be deemed “Indian” by the Federal Government signifies a political status and is not a racial classification
- “Indian Country” is recognized by US law: reservations, informal reservations, dependent Indian communities, allotments, and special designations

- Avoid generalizations
- Use present tense and contemporary examples
- Always ask how the individual or community wants to be described



Urban Indian Communities



More than 75% of AI/AN live outside of tribal lands

Nearly 7 out of every 10 AI/ANs live in or near cities

Poverty rate: 20.3% (AI/AN) vs 12.7% (non-Native)

Unemployment rate: 1.7 times higher (AI/AN) than non-Natives

Homelessness: AI/AN 3x more likely to lack housing

Challenges for Native Youth in Indian Country

Suicide is the 2nd leading cause of death (2.5x the national rate) for Native youth

1 in 9 Native youth have reported suicide attempt

High school graduation rate among Native students is 74% vs 94% for white students.

Native youth are arrested at rate 3x the rate of national average and make up 79% of the Federal Bureau of Prison's youth population.

Native youth represent 8.4% of the foster care population.

Violence (intentional injuries, suicide, and homicide) account for 75% of deaths among Native youth.



References:

<https://www.cnay.org/resource-hub/fast-facts/>

<https://bjs.ojp.gov/library/publications/american-indians-and-crime-bjs-statistical-profile-1992-2002>

Homelessness in Native Communities

AI/AN have the 2nd highest rate of homelessness compared to other racial groups

1 in 200 AI/ANs are homeless vs 1 in 1,000 in US population

Over 10% of AI/ANs in SD, ND, AK, NM, MN are experiencing homelessness

Housing Conditions in Native Communities



99.8 of tribal housing officials reported doubling up (taking in family and friends)



One third of homes on reservations overcrowded or severely crowded



40% of homes are considered substandard
Lacking public sewer system, water, electrical, phone

Factors Contributing to Poverty, Substance Use, and Homelessness

HISTORICAL TRAUMA

Colonization

Forced Removal

Boarding Schools

Assimilation policies

Relocation

Racism

Discrimination

EFFECTS OF TRAUMA

Depression and suicide

Poverty

Incarceration

Abuse and neglect

Violence

Substance abuse

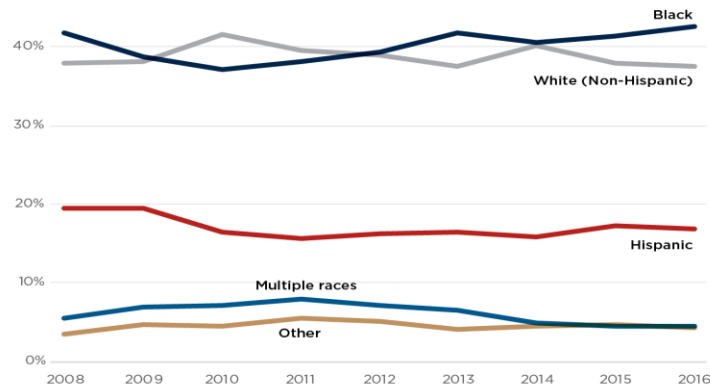
Post traumatic stress disorder



Data Collection and Invisibility

Racial Disparities in Sheltered Homelessness Are Not Improving Over Time

Share of total annual population using shelter, by race and ethnicity, 2008–2016



Data are for people who used emergency shelter and/or transitional housing over the course of the given year.

Source: Annual Homeless Assessment Report to Congress, Part 2



Native communities undercounted or omitted in data collection

Accurate data is limited

Invisibility leads to marginalization in public policies and funding



Supportive Federal Agencies & Services



Bureau of Indian Affairs

- Tribal Government
- Safety
- Self-determination
- Social services
- Justice
- Housing improvement



Indian Health Service

- Reservation hospitals and clinics
- Urban Indian health programs
- Medical care
- Behavioral health
- Substance abuse



Housing and Urban Development

- Tribal housing
- Community development
- Grants and loans
- Tribal veterans supportive housing



Health and Human Services

- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Health Resources and Services Administration (HRSA)
- Temporary Assistance for Needy Families (TANF)



Social Security Administration

- Retirement disability
- SSI benefits
- Survivor benefits
- Video Delivery Centers on Tribal Lands

Governance & Delivery of Services

Public Law No. 93-638

- Increases control of programs and solutions implemented on tribal lands
- Transfer of funding and management from federal government to tribes

BIA and IHS System of Care

- Service to approximately 2 million AI/ANs
 - Federally-operated
 - Tribally operated
 - Urban Indian Organizations

How are Services Provided?

Behavioral Health Care Service Systems

- Facilities operated directly by Indian Health Service (IHS)
- Facilities operated by tribes through contracts and compacts with IHS
- Programs managed by urban Indian health programs to provide services for eligible American Indian and Alaska Natives (member of Federally recognized tribe) in urban areas

Federal Support Programs

- Grant programs and initiatives provided to tribes or nonprofit organizations to address suicide prevention, substance abuse, youth violence prevention, mental health services, childhood trauma, traditional healing practices etc.

Availability of Services

- Vary by location, most IHS facilities on reservations in rural areas
- Access to care limited for urban populations (UIOs, referrals)
- Distance, transportation barriers, and childcare limit access to adequate services



Strengthening Capacity to Serve: Federal Level Engagement

Federally Recognized Tribes

- Tribal Leaders Directory: <https://www.bia.gov/tribal-leaders-directory>

Indian Health Service Facilities

- <https://www.ihs.gov/locations/>

Urban Indian Organizations

- <https://www.ihs.gov/urban/urban-indian-organizations/>



Strengthening Capacity to Serve: Tribal Level Engagement

Tribal Council

Tribal Hospitals and Clinics

Social Services

Child and Family Services

Behavior Health

Disability Services

Substance Abuse Prevention and Treatment

Indian Child Welfare (ICWA)

Law Enforcement

Common Services and Supports Provided by Native Communities

PROGRAMS

Housing Authority

Behavioral Health Department

Substance Abuse Prevention and Treatment Programs

Social Service Divisions

Tribal Government

Urban Indian Centers and Organizations

WHO TO CONTACT

Housing Authority Director

Behavioral Health Providers

Disability Benefit Specialists

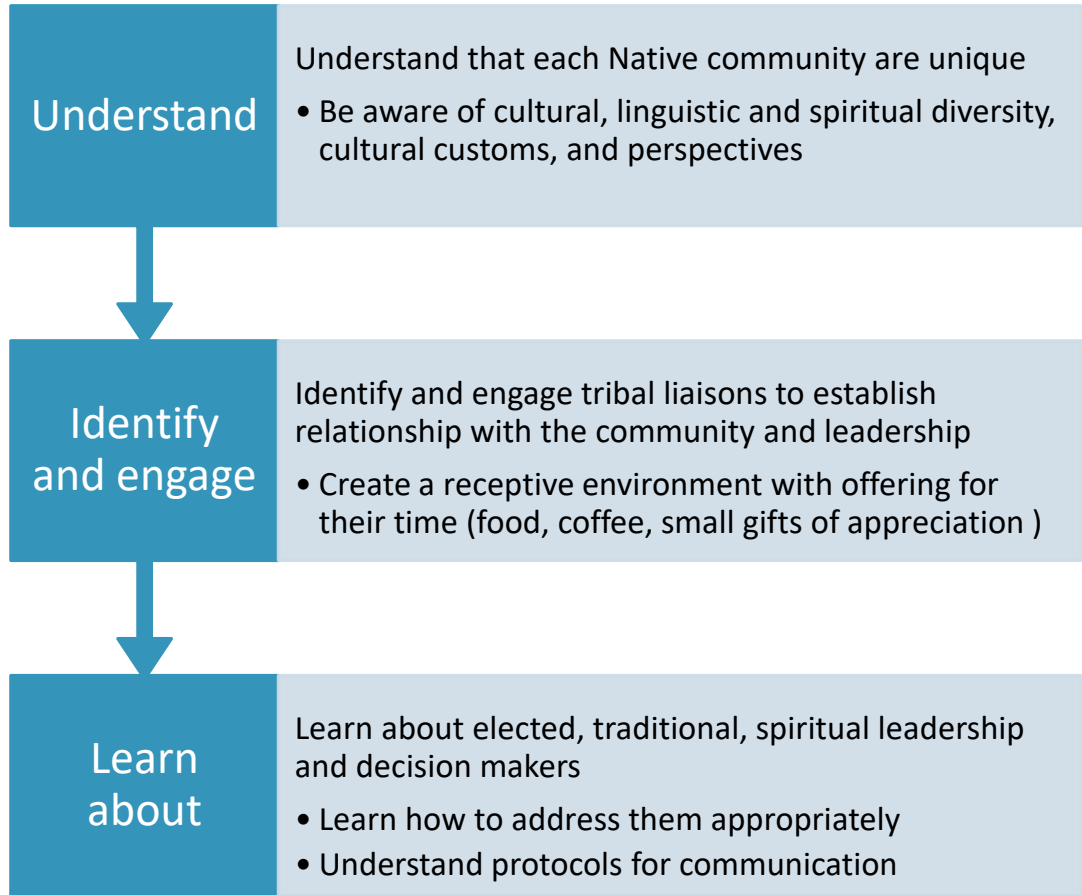
Social Workers/Case Managers

Tribal Leadership for MOU's/ Cooperative Agreements

Clinic Director



Culturally Appropriate Engagement and Collaboration with Native Communities



Culturally Appropriate Engagement and Collaboration with Native Communities

Show Cultural Humility

Approach communities with positive intent
Be open to other ways of thinking and behaving

Listen and Observe

Pay attention and observe tribal members are experts on their own community

Be Patient

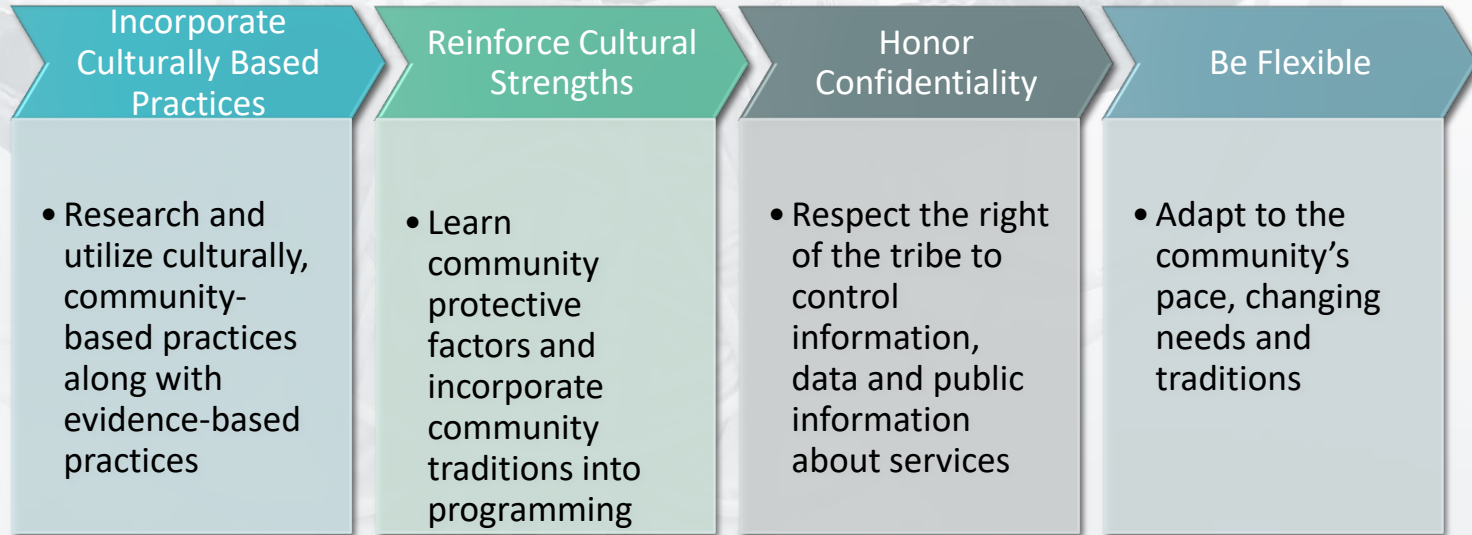
Rapport and trust do not come easily. Do not take it personally if you experience initial suspicious or frustration

Use a Tribal Perspective

Avoid using a Western, non-Native perspective



Culturally Appropriate Engagement and Collaboration with Native Communities



Best Practices for Delivering Your Messages



Understand technological access to determine appropriate communications channels

Lack of reliable internet service in many communities

Use of cell phones and mobile devices

Digital access limited to tribal offices, library or schools



Consider all forms of communication when engaging your audience

Word of mouth

Print materials

Tribal radio

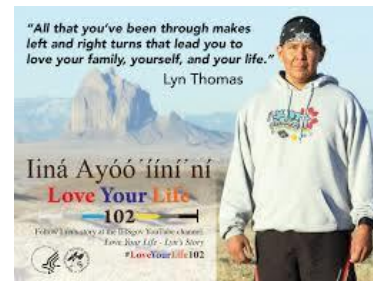
Social media

Mobile friendly website and apps, Text messaging, Television



Best Practices for Engaging Your Audience

- Seek help from Native youth and the community to shape your messages and materials
- Use trusted members of the community to deliver your messages
- Incorporate tribally specific photographs of people and locations, cultural designs, and artwork that will resonate with the community
- Include words, phrases and messages in the Native community's language or dialect
- Always get approval from leadership to distribute your messages and materials



Questions?

Contact

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The Impact of SOAR in Native Communities in Montana

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SOAR Case Worker and PATH Liaison
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April 28, 2022



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Working with Indigenous People

- Serving individuals through the SOAR Process requires an awareness of the political and legal status of American Indians.
 - For indigenous people, an awareness of the relationship between the United States Government, and each tribal population.
- American Indians and Alaska Natives are not only U.S. citizens, but they are also citizens of their state and tribal nation.

Collecting Records and Vital Documents

- Many applicants may have a history of services with the Bureau of Indian Affairs (BIA) Social Services Office.
- It will be helpful to:
 - Identify family contacts
 - Establish an educational history (IEP, records from a federal or state school system)
 - Provide collaboration with mental health and medical providers
 - Identify contract services used from behavioral health and residential care facilities

Collecting Records and Vital Documents

- Organizations to assist with locating records:
 - Informational Officers (Area Office Level) can help you manage archive record searches (7 years and older)
 - Regional Indian Health Services (IHS) Hospitals
 - Local Clinics (Service Units)
 - Tribal Health Clinics, Prevention Programs, and Wellness Centers
 - Tribal Recovery Programs

Completing SOAR Applications

- Engagement is key!
- Establish trust
- Work collaboratively with the applicant to apply for SSI/SSDI

Thank You

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

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1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD)

Poll Question

- If you are interested in learning more about working with Native applicants and within Native communities, please provide your Name / State / Email.
- This question will also be on the webinar evaluation.

Questions and Answers

Please type your
questions into the
Q&A box.



AI/AN Tools and Resources

- SOAR Works Website: Articles, Issues Briefs, Webinars:
<https://soarworks.samhsa.gov/topics/american-indians-alaska-natives>
- Bureau of Indian Affairs: <https://www.bia.gov>
- Indian Health Services: <https://www.ihs.gov>

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you will be leaving zoom.us to access the external URL below

[https:// www.surveymonkey.com/r/VNJHSXG](https://www.surveymonkey.com/r/VNJHSXG)

Are you sure you want to continue?

Continue

Stay on zoom.us

Thank You

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